Company Tracking Number: IRA/LTC

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium

Variable

Product Name: IRA/AnnuiCare
Project Name/Number: IRA/LTC/

Filing at a Glance

Company: Guaranty Income Life Insurance Company

Product Name: IRA/AnnuiCare SERFF Tr Num: GILI-126411348 State: Arkansas TOI: A02I Individual Annuities- Deferred Non-SERFF Status: Closed-Approved-State Tr Num: 44276

Variable Closed

Sub-TOI: A02I.002 Flexible Premium Co Tr Num: IRA/LTC State Status: Approved-Closed

Filing Type: Form Reviewer(s): Linda Bird

Authors: Sherry Ducote, Darlene

Cooper

Date Submitted: 12/08/2009 Disposition Status: Approved-

Closed

Disposition Date: 12/09/2009

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: IRA/LTC Status of Filing in Domicile: Authorized Project Number: Date Approved in Domicile: 12/01/2009

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Filing Status Changed: 12/09/2009 Explanation for Other Group Market Type:

State Status Changed: 12/09/2009

Deemer Date: Created By: Darlene Cooper

Submitted By: Darlene Cooper Corresponding Filing Tracking Number:

Filing Description:

The attached IRA/AnnuiCare Endorsement is being submitted for your review and approval. This endorsement is intended to replace previously approved Form IRA/LTC (5/03), which was approved by the Arkansas DOI February 24, 2004.

The passage of the "Pension Protection Act of 2006" required that Item #5 be revised to accurately reflect the new tax provisions for AnnuiCare premium withdrawals effective January 1, 2010.

Company Tracking Number: IRA/LTC

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium

Variable

Product Name: IRA/AnnuiCare
Project Name/Number: IRA/LTC/

The endorsement will be used with the following previously approved annuity policies and long-term care riders:

Form Number - Approval Date

1FP-7 (1/08) - 04/03/08 (SERFF Tr Num GILI-125539997)

1FP-10 (1/08) - 04/03/08 (SERFF Tr Num GILI-125539997)

1SP4 (4/00) - 09/07/00

1SP5 - 12/11/98

LTC-2 (AR 2/06) - 01/31/07

LTC-3 (AR 2/06) - 01/31/07

Please call 800.535.8110 x289 or email darlene@gilico.com if you have any questions or need additional information. Thank you for your kind assistance.

Company and Contact

Filing Contact Information

Darlene Cooper, Administrative Assistant darlene@gilico.com

929 Government St. 225-383-0355 [Phone] 289 [Ext]

Baton Rouge, LA 70802 225-343-0047 [FAX]

Filing Company Information

Guaranty Income Life Insurance Company CoCode: 64238 State of Domicile: Louisiana
929 Government Street Group Code: Company Type: Life & Annuity

Baton Rouge, LA 70802-6089 Group Name: State ID Number:

(225) 383-0355 ext. [Phone] FEIN Number: 72-0201480

Filing Fees

Fee Required? Yes
Fee Amount: \$20.00
Retaliatory? Yes

Fee Explanation: Louisiana, our domiciliary state, did not charge a fee for filing this endorsement.

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Guaranty Income Life Insurance Company \$20.00 12/08/2009 32566598

SERFF Tracking Number: GILI-126411348 State: Arkansas

Filing Company: Guaranty Income Life Insurance Company State Tracking Number: 44276

Company Tracking Number: IRA/LTC

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium

Variable

Product Name: IRA/AnnuiCare
Project Name/Number: IRA/LTC/

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-	Linda Bird	12/09/2009	12/09/2009

Company Tracking Number: IRA/LTC

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium

Variable

Product Name: IRA/AnnuiCare
Project Name/Number: IRA/LTC/

Disposition

Disposition Date: 12/09/2009

Implementation Date: Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Company Tracking Number: IRA/LTC

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium

Variable

Product Name: IRA/AnnuiCare
Project Name/Number: IRA/LTC/

Schedule Item Schedule Item Status Public Access

Supporting DocumentFlesch CertificationYesSupporting DocumentApplicationNoSupporting DocumentLife & Annuity - Acturial MemoNoFormIRA/AnnuiCare EndorsementYes

Company Tracking Number: IRA/LTC

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium

Variable

Product Name: IRA/AnnuiCare
Project Name/Number: IRA/LTC/

Form Schedule

Lead Form Number: IRA/LTC (Rev. 12/09)

Schedule		Form Type Form Name	Action	Action Specific	Readability	Attachment
Item	Number			Data		
Status						
	IRA/LTC	Certificate IRA/AnnuiCare	Initial		50.700	IRA-LTC
	(Rev.	Amendmen Endorsement				(Rev. 12-
	12/09)	t, Insert				09).pdf
		Page,				
		Endorseme				
		nt or Rider				

GUARANTY INCOME LIFE INSURANCE COMPANY

P.O. Box 2231, Baton Rouge, LA 70821 929 Government Street, Baton Rouge, LA 70802 800.535.8110 / 225.383.0355 www.gilico.com

IRA/ANNUICARE® ENDORSEMENT

As used in this form,	IRA means IRA Policy Number:
	AnnuiCare® means AnnuiCare® Policy Number:

Your IRA cannot be pledged or obligated. The purpose of this endorsement is to explain the terms upon which you are being provided long-term care insurance while you are in the process of accepting withdrawals from your IRA. You may reduce or terminate your long-term care insurance at any time, subject only to the provisions of that policy.

For the purpose of determining your long-term care benefits and premiums, "Accumulation Value" as used in the AnnuiCare® rider form (LTC-2) means the combined Accumulation Values of the policies to which this endorsement is attached.

- 1. For a period up to five (5) years, the Company will waive withdrawal charges on transfers from your IRA to your AnnuiCare® policy.
 - NOTE: Any other withdrawals, including withdrawals to pay tax obligations, are subject to withdrawal charges.
- 2. Any amount you withdraw from your IRA each year will be reported as required by the IRS, and you will receive IRS Form 1099-R for the amount you withdraw each year regardless of type of withdrawal.
- 3. IRA withdrawals you specify will be applied to your AnnuiCare® policy unless you direct otherwise.
- 4. No additional IRA contributions are allowed without prior approval by the Company.
- 5. All long-term care premiums will be withdrawn monthly from the AnnuiCare® Policy. Premiums will first be withdrawn from your cost basis, then from your accumulated interest. Effective January 1, 2010, premium withdrawals are not considered reportable income.
- 6. Any long-term care benefits payable before the IRA has been fully distributed will be paid first from any remaining value of the undistributed IRA, unless you elect the payment option described in item 7 below.
- 7. If you choose that your IRA not be distributed, "Accumulation Value" will refer only to the AnnuiCare® Policy, and your long-term care premiums and benefits will be reduced accordingly, subject to policy minimums. In lieu of reduced benefits, you may make an immediate one-time deposit into the AnnuiCare® Policy up to the value of the IRA.

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Company Tracking Number: IRA/LTC

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium

Variable

Product Name: IRA/AnnuiCare
Project Name/Number: IRA/LTC/

Supporting Document Schedules

Item Status: Status

Date:

Satisfied - Item: Flesch Certification

Comments: Attachment:

AR ReadabilityCertification.pdf

Item Status: Status

Date:

Bypassed - Item: Application
Bypass Reason: Not Applicable.

Comments:



READABILITY CERTIFICATION

Guaranty Income Life Insurance Company, NAIC #64238, hereby certifies that Form IRA/LTC (Rev. 12/09) achieved a Flesch score of 50.7 when scored as part of the policy with which it may be used and complies with the requirements of ACA 23-80-206:

Signature of Insurance Company Officer

John H. Lancaster, President

Typed Name and Title

December 8, 2009

Date